

**Eastern Virginia Local Human Rights Committee
Meeting Minutes
August 1, 2013**

A meeting of the Eastern Virginia Local Human Rights Committee was held on Thursday, August 1, 2013, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502.

Members Present:

Mr. Matthew Albright, Chair
Ms. Denise Gordon, Vice Chair
Mr. David Paige, Secretary
Mr. John Dickinson, Member

Members Absent:

None

Providers Present:

Jacqueline Parker-Mazyck, SC/QMRP, Holiday House of Portsmouth, Inc
Melanie Draughn, SW/HRC Liaison, Holiday House of Portsmouth, Inc
Lucy Rotich, Maryview Behavioral Medicine Center
Melanie Perez-Lopez, SW, St. Mary's Home for Disabled Children
Theresa Waldo, Psychologist, St. Mary's Home for Disabled Children
Rizal Cruz, AC Support Systems
Sheri Fayton, Program Director, Bair Foundation
Greg LeFever, Administrator, Better Life Services, Inc.
Ronnie Brown, Owner, Community Options LLC
Yvonne Green, Coordinator, Virginia Home Based Counseling
Aman Massaquoi CEO, Angel House Inc
Mercedes Santos-Bell, Envision Family Services
Shemora Richardson, Jerious Counseling Services LLC
Dr. Damon Cary, Cary Associates – Youth Empowerment Services
Theresa Sands-Dowling, Cary Associates – Youth Empowerment Services
Carmalita Kovach-Watts, AIM Family Services, LLC
Deborah Hamilton, AIM Family Services, LLC
Terrell Cuffee, Potentials In Life

Providers Absent:

Latisha Holloway, Psalms Assistive Support Services LLC
Douglas Newsome, Individual Choices

Also Present Were:

Stewart Prost, Human Rights Advocate
Carmen Gerena, EVLHRC Liaison

I. **Call to Order**

Matthew Albright, called the regular session of the EVLHRC meeting to order at 9:02am, and Ms. Carmen Gerena, EVLHRC Liaison, recorded the minutes. A quorum of members was present, and the meeting, having been duly convened, was ready to proceed.

II. **Approval of Meeting Agenda**

Meeting agenda was reviewed. The Agenda was approved, motion made by Mr. John Dickinson and seconded by Ms. Denise Gordon and was unanimously approved.

III. **Review of Minutes**

A motion to accept the minutes from our April 25, 2013 meeting as presented by Mr. Matthew Albright was motioned by Mr. John Dickinson and seconded by Ms. Denise Gordon. Minutes were unanimously approved.

IV. **Public Comment**

There were no members of the public present.

V. **Old Business**

The Freedom of Information Training will be moved to the October 24th meeting.

VI. **New Business**

Mr. Albright noted that he has a new email address: fyrepup@outlook.com. We will be conducting an interview today for a new committee member at 10am.

Mr. Albright passed the chair to Ms. Denise Gordon so that he could make a motion. Mr. Albright recommended to the committee, that since we have several affiliates that are not licensed yet, would it be possible for them to just send in their report and not have to come to the meetings until they are licensed. Mr. Prost recommended against this recommendation, because all affiliates sign a cooperative agreement and in that agreement they agree to do everything that all other affiliates do. Ms. Denise Gordon agreed with Mr. Prost, so it was decided not to go through with the recommendation. At this point Ms. Gordon passed the chair back to Mr. Albright.

VII. **Program Updates**

i. **The Bair Foundation**

Sheri Fayton presented. We have nothing to report at this time.

ii. **Community Options**

Ronnie Brown, Program Director was present. They have 3 clients and they did not have anything to report. Reports were emailed.

iii. **Holiday House of Portsmouth, Inc**

Melanie Draughn presented, this quarter they had a census of 28. There were no allegations of abuse and no complaints. We have 1 individual with protective mitt. We will be meeting in executive session.

- iv. **Maryview Behavioral Medicine Center**
Lucy Rotich presented their report. We serviced 647 patients. We had 4 physical abuse allegations and all were closed and 3 cases of complaints. We will be reporting in executive session. Reports were sent in late.
- v. **Psalms Assistive Support Services**
Latasha Holloway was not present, but a report was sent. Not licensed yet.
- vi. **AC Support System**
Rizal Cruz presented. There were no complaints or allegations. Request was made to add a new location to this committee (this is their 3rd location). Also requested to add the use of protective devices to their Behavior Policy. Motion was made for approval of the Behavior Plan policy with correction, Mr. John Dickinson approved and Ms. Denise Gordon seconded the motion and it was unanimously approved. Motion was made to accept new location for AC Support System, Mr. Dickinson moved and Ms. Gordon seconded and the motion was unanimously approved.
- vii. **St. Mary's Home for Disabled Children / The Albero House**
Melanie Perez-Lopez presented. During this quarter we had 90 residents. There were 6 allegations of abuse and 1 was a complaint. Will meet in executive session. In regards to The Albero House, we did have the licensing visit on July 9th we have a conditional group home license from DBHDS and we had our 1st resident admitted on Tuesday, July 30.
- viii. **Better Life Services**
Greg LeFever presented. We have 78 clients with 0 cases of abuse, allegations or neglect to report.
- ix. **A Positive Living**
Is no longer affiliated.
- x. **VA Home Based Counseling**
Yvonne Green presented. There have been no allegations of abuse or neglect. We are currently servicing 16 in home-based and 60 in supported services.
- xi. **Angel House**
Aman Massaquoi presented. Still unlicensed and have no incidents to report. We are still waiting for final inspection for licensing. Report sent in late.
- xii. **Envision Family Services**
Mercedes Santos Bell, Executive Director presented. For this reporting period we are servicing 21 children in day program. We have no incidents to report.
- xiii. **Jerious Counseling Group**
Shenora Richardson presented. We have 7 clients. We have no allegations of abuse or complaints.

xiv. **Cary Associates Youth Empowerment Services**

Dr. Damon Cary reported. We are licensed and have 1 client. We have no allegations of abuse or complaints to report. Reports were sent in. Asked to be listed as Youth Empowerment Services.

xv. **AIM Family Services**

Camelita Kovachs-Watts reported. We are currently not licensed yet. We have just received approval for our Policies and Procedures and we are waiting a walk through. Need form to send in report.

xvi. **Potentials In Life**

Terrell Cuffee reported. Not serving any clients yet. Nothing to report. Reports sent in late.

xvii. **Individual Choices**

Douglas Newsome had to leave due to an emergency, but their report was sent in. He excused himself with Mr. Prost.

VIII. **Office of Human Rights**

Mr. Stewart Prost updated the status of this committee. Mr. Prost mentioned that the committee has 1 vacancy. It is the general vacancy spot that can be filled by a family member, a professional, anyone who is interested on serving on the committee. Ms. Gordon will complete here second term at the June 30, 2014 meeting. Ms. Gordon's position is one of the general family/professional positions in the committee. Mr. Paige and Mr. Albrights terms are not over until 2015. Overall this committee is in good shape. We will be interviewing someone today for the open position.

Mr. Prost mentioned that since our last meeting there has been a couple of focus groups there were some surveys put out about the Human Rights regulations, we are going through a significant revision. Based on the focus groups potential language will be sent to the state board of Behavioral Health and Developmental Service Board review. Sometime towards the end of the year they may vote on it and then it will go up on public comment. It still can be a while before the regulations actually change, but we are looking at some changes we are trying to streamline the complaint process a little bit to make it all one process. There are a lot of things rolling in the air, so stay tuned and as things develop we will be coming out with changes in the Human Rights regulations.

Mr. Prost also wanted to remind providers that the CHRIS system is here and it is the way that you report abuse allegations, complaints, deaths, and serious injuries; complaints to our office and deaths and serious injuries to licensing. It is an operation and I understand that people are still having trouble getting into the system. Particularly if you use goggle chrome as your web browser you will not be able to get on and I think certain versions of internet explorer, mostly the newer one, people are having some problems entering in some data. Mr. Albright stated that there has been no problem with 'firefox' when trying to get into CHRIS. Mr. Prost continued that it is important that if you have something to report such as an abuse allegation and it occurs or gets reort to you on a Friday night at 10pm for example, it needs to be entered in the next day. You don't wait until the following Monday to enter it in, you do it the next day, and if you are having issues reporting it, what

you do is contact our office and fax us the notification the way you used to do it. You state “we’re not able to get into CHRIS we are having trouble, and call the central office (the name of the lady at central office is Susan Tinsley) and they will work with you on it.” Mr. Albright also mentioned that if you are having trouble with the system make sure that you document it. Mr. Prost continued and mentioned that the goal is that CHRIS will be the sole record for the abuse allegation, complaint, serious incident or deaths, and the intent is to be able to enhance the system to be able to put in investigative reports or scan them in and put in more data. If you have any questions please do not hesitate to Mr. Prost as it is simpler for him to open the case and fill it in, because it is the advocate that closes out the cases in CHRIS not the provider. Mr. Prost mentioned when you send in a case to CHRIS there is an email that is generated to Mr. Daye and to Annette Joseph Walker, our secretary and then he assigns them and then once we get the emails I put them on a list and keep track of them and when day 10 comes on an abuse allegation if I don’t see it, I will not hesitate to call you and say you need to get this in because those are the requirements. We will probably be even more vigilant than we have been in past. Hopefully once the bugs get worked out things will go a little smoother. So as a reminder, once you get licensed you need to go and get set up with the Delta which is your way in and then get set up with CHRIS. Because Delta is the porthole to get into CHRIS and it is also the porthole to get into other things such as for ID providers, providers that serve people with intellectual disabilities, a system called Idles. Once you get licensed you need to get in with the CHRIS system and be able to enter in data, hopefully for a lot of you, you will need to do it very rarely, which means you don’t have a lot of abuse and neglect allegations or complaints and deaths or serious injuries, those thing are rare, but they happen and we deal with them and it is how you deal with them that we really look at. You can have an abuse allegation and if you totally investigate it and look into it and whatever your finding is and the fact that you did that thoroughly and that did what you were supposed to do, is what we are looking at. Also if you have a complaint, you sit down and talk to the person and try to resolve it and document it. Sometimes the best way to show how good a company is, is not what kind of product they give you, but what kind of service they give you when there is an issue and to what lengths they go to resolve it and to fix it. So as for complaints go, it is how you respond to them; you are straight forward, you document it and you get it into our system and you report it. All this is just good practice and again if you have any questions don’t hesitate to contact me.

Mr. Prost made a couple of reminders, some of our obligations to the committee, again the quarterly reports, the quarter is Jan 1 – March 31, April 1 - June 30, July 1 – Sept 30, and Oct 1 – Dec 31. Once those are done go ahead and pull that form up and get it sent out. It is okay to email it as long as it doesn’t have any protective health information or any confidential information. We do not consider email to be secure, if there is detailed information about allegations that is going to be presented in closed session you can bring it with you. Another thing that Mr. Prost wanted to bring to our attention was if you are a provider serving people with intellectual disabilities and you are getting a person coming from one of the training centers, Southside Virginia Training Center is going to close, sometime in February or March of next year or so, and if you get someone from a facility like that, you are required to fill out a PIR request (Provider Information Request) and what that is, is that we have to go out and evaluate whether we think it is a good match and in some cases it involves going out and making a physical site visit and in other cases it may involve, since we’ve been there before, we may say okay we’ve been there we don’t have

to go out there again, but we may call you and ask you questions. One of the things that we are going to be looking for when we do our visits and when we do these forms is whether or not you have in your policies and procedures the use of protective restraints actually in your policy. A lot of people don't have them in there because they didn't think that they needed to worry about that. Protective restraints are: gait belts, mitts, hand splints, helmets, bed rails; and basically the difference between a protective restraint and a restraint for behavioral purposes is that the protective restraint is there to deal with situations that are not behaviorally based that may be cognitively based (ex: seizures, or involuntary movements, or spasms). So what you need to do there, is that you need to have policies that basically say what kind of protective restraints you are going to use, that you are going to get a doctor's order that is time limited (maximum a year) and that you will also have in the policy something to the effect that there will be a specific plan developed and that there will be training for the person or the AR signing off on that plan. It does not require that it go to the local Human Rights Committee, but if you are an ICF it does go to your SCC (Specially Constituted Committee), but what we are going to be looking for is when we don't see that in your policy we are going to ask you to put that into your policy regardless of whether the person coming into your program needs it. The reason is as we get more of these folks from training centers coming into the community and even when Southside closes I don't think that is going to be the end of it, but it will probably extend the tide a bit, because you have 3 more centers that are going to close between now and 2020. What will happen is, you will then be already set up for when or if you do get somebody who does have bedrails or uses a helmet or anything like that. That may increase the amount of policies such as AC Support had to come before you, because also required under the Human Rights Regulations is whenever a behavior management policy is revised it needs to be brought before the committee for review and comments. So this may increase the number of policies that this committee may be looking at as time goes on.

IX. Open Session

There were no items for open session.

X. Closed Session for Human Rights Complaints, Abuse, Discrimination, Formal/Informal Complaints:

At 10:00am Ms. Denise Gordon moved the EVLHRC go into executive session pursuant to the Virginia Code Section 2.2-3711 A (4) for the protection of the privacy of individuals in personal matters not related to public business. Namely for the purpose of reviewing behavior programming and client specific data and/or complaints, and or investigations for authorized representatives for Holiday House of Portsmouth, Inc, Maryview Behavioral Medicine Center, St. Mary's Home for Disabled Children and to interview a perspective member. Motion was made by Mr. John Dickinson and seconded by Mr. David Paige. All members present voted in favor of the motion. The motion was made to accept the information given during closed Executive Session and go into open session. All members present voted in favor of the motion.

Upon reconvening in open session, each member of EVLHRC certified that, to the best of each EVLHRC Member's knowledge, only public business matters lawfully exempted from statutory open meeting requirements, and only public business matters identified in the

motion to convene the executive session were discussed in the executive session. See attached record of Executive Session. Also Ms. Gordon made a motion to accept the person who was interviewed as a perspective member of the committee. Mr. Dave Paige entered the motion and it was seconded by Mr. John Dickinson and was unanimously approved.

XI. **Adjournment**

The meeting adjourned at 11:25 a.m.

XII. **Next Meeting:**

The next meeting of the Eastern Virginia Local Human Rights Committee will be held on Thursday, October 24, 2013, at St. Mary's Home for Disabled Children, 6171 Kempsville Circle, Norfolk, VA 23502. St. Mary's Home for Disabled Children will provide refreshments.

Provider Quarterly Report of Human Rights Activities

Name of Provider: Holiday House of Portsmouth, Inc ICF/IID

Local Human Rights Committee: Eastern Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Melanie J. Draughn, BSW, QIDP

Name of Licensing Specialist: Dennis Riddick, Licensing Specialist

Number of individuals served by provider in this quarter: 28

Quarter: April, May, June 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

April 2013

Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer) 0

Exploitation: 0

Other: Restraint:

May 2013

Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer):

Exploitation:

Other: Restraint:

June 2013

Total Counts Alleged by Type:

Physical: 0

Sexual:

Verbal: Neglect:

Neglect (Peer to Peer) 0

Exploitation:_____

Other: _____ Restraint:_____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

DK (Protective Mitt) for medical use will be discussed in executive session.

Status of Complaint Cases

Total of Complaint Cases:_____0_____

Number of cases resulting in a violation:_____0_____

Cases Pending:_____0_____

Cases Closed:_____0_____

Complaint Category Totals:

Assurance of Rights:_____0_____

Dignity:_____0_____

Services:_____0_____

Participation in Decision Making;_____0_____

Confidentiality:_____0_____

Access to an Amendment of Services record:_____0_____

Restrictions on Freedoms of Everyday Life:_____0_____

Use of Seclusion Restraint and Time Out:_____0_____

Work:_____0_____

Research:_____0_____

Complaint and Fair Hearing;_____0_____

Determination of Capacity to give consent:_____0_____

Authorized Representatives:_____0_____

Complaint Resolution:_____0_____

Reporting Requirements:_____0_____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0

Number of complaints resolved in the Formal Process: 0

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Allegations of Abuse: Holiday House of Portsmouth uses the following efforts to ensure allegations of abuse and neglect are captured as reported by the regulations. Upon receipt of any allegation of abuse or neglect this facility takes steps to protect the safety and welfare of the individual, suspend the suspected employee pending outcome of the investigation, ensure that Human Rights Advocate and Regulatory Authorities have been notified within a 24 hour time frame, and completed within a 5 day time frame. This facility notifies parents and child protective services.

Human Rights Complaints: A procedure is established to allow for individuals or their parents/ authorized representatives to present their dissatisfaction with any aspect of the Holiday House program, and to seek satisfactory redress and resolution. The Holiday house will make every attempt to resolve complaints at earliest possible step. The Holiday House of Portsmouth will provide assistance and support to individual with the complaint process.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Holiday House of Portsmouth, Inc has not had any changes to DBHDS license, or citations for this quarter.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Holiday House of Portsmouth has not added any new or amended policies, procedures or program rules.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Holiday House of Portsmouth staff network with other professionals in the field of intellectual disabilities to continue to seek and recruit members for the Eastern Virginia Local Human Right Committee.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

DK: Protective mitt

Provider Quarterly Report of Human Rights Activities

Name of Provider: Maryview Behavioral Medicine Services

Local Human Rights Committee: Eastern Virginia LHRC

Name of Provider LHRC Liaison: Lucy Rotich, RN, BSN, MSA, Administrative Director

Name of Licensing Specialist: Reginald Daye, Dept. of Behavioral Health and Developmental Services

Number of individuals served by provider in this quarter: 647

Quarter : 3rd

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 4

Cases Pending:

Cases Closed: 4

Total Counts Alleged by Type:

Physical: 4 Sexual:

Verbal: Neglect:

Neglect (Peer to Peer):

Exploitation:

Other: Restraint:

Total Counts Occurred by Type:

Physical: 2 Sexual:

Verbal: Neglect:

Neglect (Peer to Peer):

Exploitation:

Other: Restraint: 4

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

None

Status of Complaint Cases

Total of Complaint Cases: 3

Number of cases resulting in a violation: _____

Cases Pending: _____

Cases Closed: 3

Complaint Category Totals:

Assurance of Rights: 1

Dignity: 1

Services: _____

Participation in Decision Making: 1

Confidentiality: _____

Access to and Amendment of Services record: _____

Restrictions on Freedoms of Everyday Life: _____

Use of Seclusion Restraint and Time Out: _____

Work: _____

Research: _____

Complaint and Fair Hearing: _____

Determination of Capacity to give consent: _____

Authorized Representatives: _____

Complaint Resolution: _____

Reporting Requirements: _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 3

Number of complaints resolved in the Formal Process: _____

Below Director:_____3_____

Director:_____

Commissioner:_____

LHRC:_____

SHRC:_____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

**Patients are provided with a copy of rights on admission and this is repeated as a part of program each day.
Nurse managers, supervisors and directors are informed of any allegations by patient and investigates.**

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

New policy on restraint prohibits 4 point restraint for children 12 and younger.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: St. Mary's Home for Disabled Children

I Human Rights Committee: Eastern Virginia LHRC

Name of Provider LHRC Liaison: Melanie Perez-Lopez

Name of Licensing Specialist: Nate Woodard _____

Number of individuals served by provider in this quarter: 90 _____

Quarter : April 1 to June 30, 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 6

Cases Pending: 0

Cases Closed: 6

Total Counts Alleged by Type:

Physical: _____ Sexual: _____

Verbal: 1 Neglect: 4

Neglect (Peer to Peer): _____

Exploitation: _____

Other: 1 _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____

Verbal: 0 Neglect: 3

Neglect (Peer to Peer): _____

Exploitation: _____

Other: 1 _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Details will be discussed in Executive Session.

Status of Complaint Cases

Total of Complaint Cases : 1

Number of cases resulting in a violation: 0

Cases Pending: 0 _____

Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: _____

Dignity: _____

Services: 1

Participation in Decision Making: _____

Confidentiality: _____

Access to and Amendment of Services record: _____

Restrictions on Freedoms of Everyday Life: _____

Use of Seclusion Restraint and Time Out: _____

Work: _____

Research: _____

Complaint and Fair Hearing: _____

Determination of Capacity to give consent: _____

Authorized Representatives: _____

Complaint Resolution: _____

Reporting Requirements: _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____ 1 _____

Number of complaints resolved in the Formal Process: _____ 0 _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

St. Mary's HDC process is a reporting of any "event" on an Event Report and daily "huddle" (M-F) to address the reports with key staff. QI reports any events of alleged abuse or neglect to Social Work immediately upon receipt. Staff can also directly report to Social Work in writing (privately and confidentially) or verbally any suspected abuse/ neglect referrals.

Staff Development does an annual inservice on our Human Rights policy and our Abuse and Neglect policy. They also orient any new employees.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

St. Mary's is adding the Albergo House to our existing license which will house 12 adults over the age of 22. We anticipate that our residents will transition to the Albergo House as they age-out of the Children's facility. We are now affiliated with this EVLHRC. We had a successful inspection with licensing on July 9, 2013 and will anticipate receiving our license within a week.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

St. Mary's HDC has not added any new policies, procedures or programs. The Albergo House (for adults) should be opening in July or August of 2013, however we anticipate that the Human Rights policy and procedures will follow our established policies as in the Children's facility.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

See report from last quarter.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out.

St. Mary's HDC received a variance to have our behavior plans reviewed by our SCC.

Plans are to be reviewed by our Positive Behavior Support Committee and SCC in July, 2013.

Provider Quarterly Report of Human Rights Activities

Name of Provider: AC SUPPORT SYSTEM LLC Local

Human Rights Committee: Easter Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: ED Gonzales

Number of individuals served by provider in this quarter: 8

Quarter : July 25, 2013

Status of Allegations of Abuse and Neglect Number of

Abuse Allegation cases: 0 Cases Pending:

n/a

Cases Closed: n/a

Total Counts Alleged by Type:

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: : 0

Number of cases resulting in a violation: 0 Cases

Pending: n/a

Cases Closed: n/a

Complaint Category Totals: Assurance of

Rights: 0 Dignity: 0

 Services: 0

Participation in Decision Making: 0

Confidentiality: 0

Access to and Amendment of Services record: 0

Restrictions on Freedoms of Everyday Life: 0 Use of

Seclusion Restraint and Time Out: 0 Work:

0

Research: 0

Complaint and

Fair Hearing: 0

Determination of Capacity to give consent: 0

Authorized Representatives: 0

Complaint Resolution: 0 Reporting

Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: n/a

Number of complaints resolved in the Formal Process: n/a

Below Director: n/a

Director: n/a

Commissioner: n/a LHRC: n/a

SHRC: n/a

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

None

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

n/a

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

N/A

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

n/a

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

n/a

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

n/a

Provider Quarterly Report of Human Rights Activities

Name of Provider: Better Life Services, Inc.

Local Human Rights Committee: Eastern Virginia

Name of Provider LHRC Liaison: Greg LeFever

Name of Licensing Specialist: Gale Schreiner

Number of individuals served by provider in this quarter: 78

Quarter : April 1– June 30, 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: : 0

Number of cases resulting in a violation: 0

Cases Pending: _____ 0 _____

Cases Closed: _____ 0 _____

Complaint Category Totals:

Assurance of Rights: _____ 0 _____

Dignity: _____ 0 _____

Services: _____ 0 _____

Participation in Decision Making; _____ 0 _____

Confidentiality: _____ 0 _____

Access to and Amendment of Services record: _____ 0 _____

Restrictions on Freedoms of Everyday Life: _____ 0 _____

Use of Seclusion Restraint and Time Out: _____ 0 _____

Work: _____ 0 _____

Research: _____ 0 _____

Complaint and Fair Hearing; _____ 0 _____

Determination of Capacity to give consent: _____ 0 _____

Authorized Representatives: _____ 0 _____

Complaint Resolution: _____ 0 _____

Reporting Requirements: _____ 0 _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____ 0 _____

Number of complaints resolved in the Formal Process: _____ 0 _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

No incidents

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Request for Intensive In Home Service addition

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: Community Options, LLC

Local Human Rights Committee: Easter Virginia Local Human Rights Committee

Name of Provider LHRC Liaison: Reginald Daye

Name of Licensing Specialist: Dennis Riddick

Number of individuals served by provider in this quarter: 3

Quarter : 3rd - July 25, 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: n/a

Cases Closed: n/a

Total Counts Alleged by Type:

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Total Counts Occurred by Type:

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: : 0

Number of cases resulting in a violation: 0

Cases Pending: n/a

Cases Closed: n/a

Complaint Category Totals:

Assurance of Rights: 0

Dignity: 0

Services: 0

Participation in Decision Making: 0

Confidentiality: 0

Access to and Amendment of Services record: 0

Restrictions on Freedoms of Everyday Life: 0

Use of Seclusion Restraint and Time Out: 0

Work: 0

Research: 0

Complaint and Fair Hearing: 0

Determination of Capacity to give consent: 0

Authorized Representatives: 0

Complaint Resolution: 0

Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: n/a

Number of complaints resolved in the Formal Process: n/a

Below Director: _____ n/a _____

Director: _____ n/a _____

Commissioner: _____ n/a _____

LHRC: _____ n/a _____

SHRC: _____ n/a _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

None

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

None

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

None

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

Provider Quarterly Report of Human Rights Activities

Name of Provider: Virginia Home Based Counseling

Local Human Rights Committee: EVA LHRC

Name of Provider LHRC Liaison: Yvonne Green

Name of Licensing Specialist: Carol Schreiner

Number of individuals served by provider in this quarter: 16

Quarter : 2nd

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: : _____ 0 _____

Number of cases resulting in a violation: _____ 0 _____

Cases Pending: _____ 0 _____

Cases Closed: _____ 0 _____

Complaint Category Totals:

Assurance of Rights: _____ 0 _____

Dignity: _____ 0 _____

Services: _____ 0 _____

Participation in Decision Making; _____ 0 _____

Confidentiality: _____ 0 _____

Access to and Amendment of Services record: _____ 0 _____

Restrictions on Freedoms of Everyday Life: _____ 0 _____

Use of Seclusion Restraint and Time Out: _____ 0 _____

Work: _____ 0 _____

Research: _____ 0 _____

Complaint and Fair Hearing; _____ 0 _____

Determination of Capacity to give consent: _____ 0 _____

Authorized Representatives: _____ 0 _____

Complaint Resolution: _____ 0 _____

Reporting Requirements: _____ 0 _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____ 0 _____

Number of complaints resolved in the Formal Process: _____

Below Director: _____ 0 _____

Director: _____ 0 _____

Commissioner: _____ 0 _____

LHRC: _____ 0 _____

SHRC: _____ 0 _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Same as previously reported

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Using handle with care since December

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

None this quarter

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

Provider Quarterly Report of Human Rights Activities

Name of Provider: Psalms Assistive Support Services

Local Human Rights Committee: _____

Name of Provider LHRC Liaison: _____

Name of Licensing Specialist: Nathan Woodard

Number of individuals served by provider in this quarter: 0

Quarter : _____

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: _____

Number of cases resulting in a violation: _____

Cases Pending: _____

Cases Closed: _____

Complaint Category Totals:

Assurance of Rights: _____

Dignity: _____

Services: _____

Participation in Decision Making: _____

Confidentiality: _____

Access to and Amendment of Services record: _____

Restrictions on Freedoms of Everyday Life: _____

Use of Seclusion Restraint and Time Out: _____

Work: _____

Research: _____

Complaint and Fair Hearing: _____

Determination of Capacity to give consent: _____

Authorized Representatives: _____

Complaint Resolution: _____

Reporting Requirements: _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____

Number of complaints resolved in the Formal Process: _____

Below Director:_____

Director:_____

Commissioner:_____

LHRC:_____

SHRC:_____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

Provider Quarterly Report of Human Rights Activities

Name of Provider: Angel House, Inc

Local Human Rights Committee: Eastern Virginia LHC

Name of Provider LHRC Liaison: Aman A. Massaquoi

Name of Licensing Specialist: None

Number of individuals served by provider in this quarter: 0

Quarter : June 30, 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: : _____ 0 _____

Number of cases resulting in a violation: 0 _____

Cases Pending: _____ 0 _____

Cases Closed: _____ 0 _____

Complaint Category Totals:

Assurance of Rights: _____ 0 _____

Dignity: _____ 0 _____

Services: _____ 0 _____

Participation in Decision Making: _____ 0 _____

Confidentiality: _____ 0 _____

Access to and Amendment of Services record: _____ 0 _____

Restrictions on Freedoms of Everyday Life: _____ 0 _____

Use of Seclusion Restraint and Time Out: _____ 0 _____

Work: _____ 0 _____

Research: _____ 0 _____

Complaint and Fair Hearing; 0 _____

Determination of Capacity to give consent: _____ 0 _____

Authorized Representatives: _____ 0 _____

Complaint Resolution: _____ 0 _____

Reporting Requirements: _____ 0 _____

Complaint Resolution Level:0

Number of complaints resolved in the Informal Process: _____ 0 _____

Number of complaints resolved in the Formal Process: _____ 0 _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

None

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

None

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

None

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

None

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

None

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

Provider Quarterly Report of Human Rights Activities

Name of Provider: Envision Family Services, LLC
Local Human Rights Committee: Eastern Virginia LHRC Region 5
Name of Provider LHRC Liaison: Mercedes Santos-Bell & Shanequa Vass, Co-Owners
Name of Licensing Specialist: Nerissa Rhodes
Number of individuals served by provider in this quarter: 21
Quarter : 1st (April 2013-June 2013)

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0
Cases Pending: 0
Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0
Verbal: 0 Neglect: 0
Neglect (Peer to Peer): 0
Exploitation: 0
Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.
Please Attachment.

Status of Complaint Cases

Total of Complaint Cases : 0
Number of cases resulting in a violation: 0
Cases Pending: 0
Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0
Dignity: 0
Services: 0
Participation in Decision Making: 0
Confidentiality: 0
Access to and Amendment of Services record: 0
Restrictions on Freedoms of Everyday Life: 0
Use of Seclusion Restraint and Time Out: 0
Work: 0

Research: 0
Complaint and Fair Hearing; 0
Determination of Capacity to give consent: 0
Authorized Representatives: 0
Complaint Resolution: 0
Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0
Number of complaints resolved in the Formal Process: 0

Below Director: _____
Director: _____
Commissioner: _____
LHRC: _____
SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation, None
- a request for fact-finding (LHRC hearing) None
- a Corrective Action Plan None

Additional reporting and review requirements as applicable:

None

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

None

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Please see attachment for CAP. All citations have been resolved and CAP was submitted to licensing specialist.

As of April 2013, our licensing specialist is Nerissa Rhodes, MA
cell: [804-240-1104](tel:804-240-1104)
fax: [757-424-8348](tel:757-424-8348)
email: nerissa.rhodes@dbhds.virginia.gov

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

None

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Envision Family Services has provided information to participants' parents and others in the community about recruitment and available committee positions.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

Provider Quarterly Report of Human Rights Activities

Name of Provider: ___Jerious Counseling Services, LLC_____

Local Human Rights Committee: **_Eastern Virginia Regional Local Human Rights Committee**

Name of Provider LHRC Liaison: Jacqueline Taylor

Name of Licensing Specialist: ED Gonzales

Number of individuals served by provider in this quarter: **7**

Quarter: 3rd

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Jerious Counseling Services, LLC no corrective action at this time.

Status of Complaint Cases

Total of Complaint Cases: : 0

Number of cases resulting in a violation: 0

Cases Pending: _____ 0 _____

Cases Closed: _____ 0 _____

Complaint Category Totals:

Assurance of Rights: _____ 0 _____

Dignity: _____ 0 _____

Services: _____ 0 _____

Participation in Decision Making; _____ 0 _____

Confidentiality: _____ 0 _____

Access to and Amendment of Services record: _____ 0 _____

Restrictions on Freedoms of Everyday Life: _____ 0 _____

Use of Seclusion Restraint and Time Out: _____

Work: _____ 0 _____

Research: _____ 0 _____

Complaint and Fair Hearing; _____ 0 _____

Determination of Capacity to give consent: _____ 0 _____

Authorized Representatives: _____ 0 _____

Complaint Resolution: _____ 0 _____

Reporting Requirements: _____ 0 _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____ 0 _____

Number of complaints resolved in the Formal Process: _____ 0 _____

Below Director: _____

Director: Kimberly Johnson _____

Commissioner: _____

LHRC: Mr. Post

SHRC: Mr. Day

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures. Jerious Counseling Services, LLC was licensed on March 1, 2013. We are serving at this moment 7 clients.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs. No amended policies or rules at this time.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed. No action taken at this time.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out: 0

Provider Quarterly Report of Human Rights Activities

Name of Provider: Cary Associates LLC, DBA as Youth Empowerment Services

Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee

Name of Provider LHRC Liaison: Theresa Sands-Dawling

Name of Licensing Specialist: Dennis Riddick

Number of individuals served by provider in this quarter: One (1)

Quarter : April-June 2013

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: none

Cases Pending: none

Cases Closed: none

Total Counts Alleged by Type: None

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Total Counts Occurred by Type: None

Physical: _____ Sexual: _____

Verbal: _____ Neglect: _____

Neglect (Peer to Peer): _____

Exploitation: _____

Other: _____ Restraint: _____

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Youth Empowerment Services is still unlicensed and is currently not serving any clients.

Status of Complaint Cases

Total of Complaint Cases: None

Number of cases resulting in a violation: _____

Cases Pending: _____

Cases Closed: _____

Complaint Category Totals: none

Assurance of Rights: _____

Dignity: _____

Services: _____

Participation in Decision Making: _____

Confidentiality: _____

Access to and Amendment of Services record: _____

Restrictions on Freedoms of Everyday Life: _____

Use of Seclusion Restraint and Time Out: _____

Work: _____

Research: _____

Complaint and Fair Hearing: _____

Determination of Capacity to give consent: _____

Authorized Representatives: _____

Complaint Resolution: _____

Reporting Requirements: _____

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: _____

Number of complaints resolved in the Formal Process: _____

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

None

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

As of 5/20/13 Youth Empowerment Services holds a Conditional license for Intensive In-home. The license is valid from 5/20/2013 through 11/19/2013

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

None

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

We are in full support and understanding of our Local Human Rights Committee. We pledge to fully cooperate and provide input, suggestions, and assistance when asked, offered, or requested.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

None

Provider Quarterly Report of Human Rights Activities

Name of Provider: Individual Choices, Inc.
Local Human Rights Committee: Eastern Virginia Local Human Rights Committee
Name of Provider LHRC Liaison: Douglas Newsome
Name of Licensing Specialist: Dennis Riddick
Number of individuals served by provider in this quarter: Six
Quarter : Third Quarter

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: Zero
Cases Pending: Zero
Cases Closed: Zero

Total Counts Alleged by Type:

Physical: Zero Sexual: Zero
Verbal: Zero Neglect: Zero
Neglect (Peer to Peer): Zero
Exploitation: Zero
Other: Zero Restraint: Zero

Total Counts Occurred by Type:

Physical: Zero Sexual: Zero
Verbal: Zero Neglect: Zero
Neglect (Peer to Peer) : Zero
Exploitation: Zero
Other: Zero Restraint: Zero

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: Zero
Number of cases resulting in a violation: Zero
Cases Pending: Zero
Cases Closed: Zero

Complaint Category Totals:

Assurance of Rights: Zero
Dignity: Zero
Services: Zero
Participation in Decision Making: Zero
Confidentiality: Zero
Access to and Amendment of Services record: Zero
Restrictions on Freedoms of Everyday Life: Zero
Use of Seclusion Restraint and Time Out: Zero
Work: Zero
Research: Zero
Complaint and Fair Hearing: Zero

Determination of Capacity to give consent: Zero

Authorized Representatives: Zero

Complaint Resolution: Zero

Reporting Requirements: Zero

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: Zero

Number of complaints resolved in the Formal Process: Zero

Below Director: _____

Director: _____

Commissioner: _____

LHRC: _____

SHRC: _____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

We would like to discuss restrictive devices ordered by Person's Served physicians.

Provider Quarterly Report of Human Rights Activities

Name of Provider: Potentials In Life LLC

Local Human Rights Committee: Eastern Virginia Regional Local Human Rights Committee

Name of Provider LHRC Liaison: Shunda Cuffee

Name of Licensing Specialist: Allison Hunter-Evans

Number of individuals served by provider in this quarter: 0

Quarter :

Status of Allegations of Abuse and Neglect

Number of Abuse Allegation cases: 0

Cases Pending: 0

Cases Closed: 0

Total Counts Alleged by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Total Counts Occurred by Type:

Physical: 0 Sexual: 0

Verbal: 0 Neglect: 0

Neglect (Peer to Peer): 0

Exploitation: 0

Other: 0 Restraint: 0

Provide details, by date of occurrence, of all cases. Include any required Corrective Action.

Status of Complaint Cases

Total of Complaint Cases: 0

Number of cases resulting in a violation: 0

Cases Pending: 0

Cases Closed: 0

Complaint Category Totals:

Assurance of Rights: 0

Dignity: 0

Services: 0

Participation in Decision Making; 0

Confidentiality: 0

Access to and Amendment of Services record: 0

Restrictions on Freedoms of Everyday Life: 0

Use of Seclusion Restraint and Time Out: 0

Work: 0

Research: 0

Complaint and Fair Hearing; 0

Determination of Capacity to give consent: 0

Authorized Representatives: 0

Complaint Resolution: 0

Reporting Requirements: 0

Complaint Resolution Level:

Number of complaints resolved in the Informal Process: 0

Number of complaints resolved in the Formal Process: 0

Below Director: _____

Director: _____

Commissioner: _____

LHRC:_____

SHRC:_____

Provide details, by date of occurrence, of all cases that resulted in the following:

- a violation,
- a request for fact-finding (LHRC hearing)
- a Corrective Action Plan

Additional reporting and review requirements as applicable:

Please provide information about your efforts to ensure that allegations of abuse and neglect and human rights complaints are captured and reported as required by the regulations.

Provide information about any changes to your DBHDS licensing status including citations, service additions and closures.

Provide information about any new or amended policies, procedures or program rules that could potentially impact the human rights of individuals receiving services through your organization including but not limited to, restrictions, restraints, seclusions and time-outs.

Please list the actions you have taken to meet the provider's requirements under section 12 VAC 35-115-250 (A) related to support of the LHRC and recruitment of members as needed.

Quarterly Review of any Behavioral Plans involving the use of restraint or time out:

EVLHRC QUARTERLY MEETING DATES AND LOCATIONS 2013

1 ST Quarterly Meeting	9:00 a.m., Thursday January 24, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
2 nd Quarterly Meeting	9:00 a.m., Thursday April 25, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
3 rd Quarterly Meeting	9:00 a.m., Thursday July 25, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502
4 th Quarterly Meeting	9:00 a.m., Thursday October 24, 2013	St. Mary's Home for Disabled Children 6171 Kempsville Circle Norfolk, VA 23502